PAYER'S name, street address, city, state, ZIP code, and telephone no. AGOSTINO VON HASSELL	Form 1899-MISC 2 Miscellaneous Inc	2005 ome	DMB No. 15450115 39-1808647 Department of Treasury IRS
P.O BOYCE BOX 225	1 Rents	2 Royaltes \$	3 Other income \$
BOYCE, VIRGINIA 22620	Fed. Inc. tax withheld Nonemployee	\$ Substitute payment in	6 Medical and health pare payments \$
PAYER'S Federal identification number 080-60-0368 RECIPIENT'S identification number 132-68-1092	\$ 321.79 10 Crop Insurance proceeds	seu or dividends/ interest	9 Payer made direct sales of \$5,000/more of consumer products to a buyer (recipient) for resale
RECIPIENT'S name, address, and ZIP code SHERILYN KULESH SHERILYN KULESH DESIGN	\$ 13 Excess golden parachute paymants	11 September 11 September 14 Gross proceeds paid to	12 184 185 18
17 STRINGER DRIVE DOYLESTOWN, PA 18901	\$ 16b Section 408A Income	\$	15a Section 409A deterrals
18901	46 -	47	18 State income
Account number (see instructions) 132681092/9	\$ Copy B For Recipient (k	eep for your records)	\$
	If you are required to file a rep- on you if this income is taxable	eep for your records) on and is poing furnished to the into a negligance penalty or othe and the IRS determines that it	Internal Revenue Service. r canction may be imposed has not been reported.

Form 1099-MISC CORRECTED (if checked) PAYER'S name, street address, city, state, ZIP code, and telephone no. AGOSTINO VON HASSELL	Form 1099-MISC 2	2005 come	OMB No. 1545-0115 39-1808647
UPPER SALEM, ROUTE 723 P.O BOYCE BOX 225 BOYCE, VIRGINIA 22620	1 Rents \$ 4 Fed. Income tax withheld \$ 7 Nonemployee	\$ Fishing boat proceeds \$ Substitute payments in	Department of Tressury IRS 3 Other income \$ 6 Medical and health care payments
PAYER'S Federal Identification number 080-60-0368 RECIPIENT'S Identification number 132-68-1092	\$ 321.79	lieu of dividends/interest	9 Payer made direct sales of 35,000/more of consumer products to a buyer (recipient) for retaile
RECIPIENTS name, address, and ZIP code SHERILYN KULESH	10 Crop Insurance proceeds	11	12
SHERILYN KULESH DESIGN 17 STRINGER DRIVE	13 Excess golden parachute payments	an attorney	15a Section 409A deferrals
DOYLESTOWN, PA 18901	15b Section 409A Income	·	
	16 State tax with held	17 State/Payer's state no.	18 State income
Account number (see instructions)	\$		\$
132681092/9 5 FMISB2I NTF 2582D13 Copyright 2005 Greatland/Nelco - Forms	Copy 2 To be filed with recipier	d's state income tax retu	·

Instructions to Recipients

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) tax. Amounts shown may be subject to soft-employment (SE) tax. If your not income from self-employment is \$400 or more, you must file a roturn and compute your SE tax on Schedule SE (Form 1040). See Pub. 533, Self-Employment Tax, for more information. If no income or social security and Medicare taxes were withheld and you are still recalling these payments, see Form 1040–ES, sectional Tax for individuals. Individuals must report as applicated below. Estimated Tax for Individuals. Individuals must report as explained below. Corporations, tiducianes, or partnerships report the amounts on the proper line of

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1040). If you BOXES 1 and Z. Report rents from real estate on Schedule E (Form 1040). It you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business, report on Schedule C or C-EZ (Form 1040). For royalties on timber, coal, and from one, see Pub. 544, Sales and Other Dispositions of Assets.

BOX 3. Generally, report this amount on the "Other income" line of Form 1040 and identify the name of the business of the parameter are invested as the business of the continuous of the continu BOX 3. Generally, report this amount on the "Other income" line of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, indian gaming profits, or other taxable income. See Pub. 525, Taxable and Nontaxable income. If it is trade or business income, report this amount on Schedule C, C-EZ, or F (Form 1040). BOX 4. Shows backup with holding or with holding on Indian gaming profits. Generally, a payer must backup withhold at a 28' rate if you did not furnish your taxpayer identification number. See Form W-9, Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax return as tax withheld.

BOX 5. An amount in this box means the fishing boat operator considers you

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Fishermen.

Box 6. Report on Schedule C or C-EZ (Form 1040).

Box 7. Shows nonemplayee compensation. If you are in the trade or business of DOX f. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F(Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare taxes. Contact the payer if you believe this form is incorrect or has been issued in error. If you believe the believe the leave the lea you believe this form is incorrect or has been issued in error. If you believe you are an employee, report this amount on line? of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in lisu of dividends or tax-exempt interest Report on the "Other income" line of Form 1040.

Box 9. If checked, \$5,000 or more of sales of consumer products was paid to you

on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C or C-EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040). Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 instructions for where to report. Box 14. Shows gross proceeds paid to an attorney in connection with legal

DOX 14. Shows gross proceeds paid to an attorney in connection with regal services. Report only the taxable part as income on your return.

BOX 15a. Shows current year defensals as a nonemployee under a section 409A nonqualified defented compensation (NQDC) plan. Any earnings on current and prior year deferrals must also be reported.

year determine man and the reported.

Box 15b. Shows income as a nonemployee under a NODC plan that does not meet the requirements of section 4084. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable. is also included in this box. This income is also subject to a substantial additional tax to reported on Form 1040. See "Total Tax" in the Form 1040 instructions. Boxes 15-18. Shows state or local income tax with held from the payments.

Form 1099-MISC	Пеорог	TTED CO. 1		•
PAYER'S name, street address, city, s AGOSTINO VON HA	tate. ZIP code, and telephone an	TED (if checked) (ke	OMB No. 1545-0115	Ĭ
UPPER SALEM, RO P.O BOYCE BOX 2 BOYCE, VIRGINIA	UTE 723 25	\$ 2 Royalties	2006	Miscellaneous Income
		\$	Form 1099-MISC	39-1968847 Department of the Treasury — IRS
		3 Other income	4 Fed. Inc. tax wit	thheld Copy B
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health payments	For Recipient
080-60-0368	132-68-1092	s	s	
RECIPIENT'S name, address, and ZIP SHERILYN KULESH SHERILYN KULESH		7 Nonemployee compensation		rest This is important tax information and is
		\$ 2285.00	\$	being furnished to the internal Revenue
17 STRINGER DRIV	Œ	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale	10 Crop Insurance proc	return, a negligence penalty or other
DOYLESTOWN, PA 1	8901	11	12	sanction may be imposed on you if this income is
Account number (see instructions)		13 Excess golden parachute payments	14 Gross proceeds paid attorney	to an determines that it has not been
15a Section 409A deferrals	15h n-10.		<u>\$</u>	reported,
\$	150 Section 409A Income	16 State tax withheld	17 State/Payer's state n	c. 18 StateIncome
<u> </u>	\$	s		

Instructions for Recipients

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334, Tax Guide for Smell Business, for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES, Estimated Tax for Individuals. Individuals must report as explained below. Corporations, fiduciaries, or partnerships report the amounts on the proper line of your tax return.

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1040). If you provided significant services to the tenant, soid real estate as a business, or rented personal property as a business, report on Schedule C or C-EZ (Form 1040). For royalties on timber, coal, & iron ore, see Pub. 544, Sales and Other Dispositions of Assets.

Box 3. Generally, report this amount on the "Other income" line of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525, Taxable and Nontaxable Income. If it is trade or business income, report this amount on Schedule C, C-EZ, or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold at a 28% rate if you did not furnish your taxpayer identification number. See Form W-9, Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Fishermen.

Box 6. For individuals, report on Schedule C or C-EZ (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare taxes. Contact the payer If you believe this form is incorrect or has been issued in error. If you believe you are an employee, report this amount on line 7 of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in fieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040.

Box 9. If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-self, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C or C-EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 instructions for where to report.

Box 14. Shows grass proceeds paid to an altorney in connection with legal services. Report only the taxable part as income on your return. Box 15a. Shows current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A. Any earnings on current and prior year deferrals are also reported.

Box 15b. Shows income as a nonemployee under a NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to be reported on Form 1040. See "Total Tax" in the Form 1040 instructions.

Form 1099-MISC CORRE	CTED (if checked) (ke	ep for your records)	ı
PAYER'S name, street address, city, state, ZIP code, and telephone no. THE REPTON GROUP, LLC	1 Rents	OMB No. 1545-0115	
399 PARK AVENUE NEW YORK, NY 10022	\$ 2 Royalties	2003	Miscellaneous Income
	\$	Form 1099-MISC	39-1908647 Department of the Treasury IRS
	3 Other income	4 Fed. Inc. tax wi	thheld Copy B
PAYER'S Federal identification number RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health payments	For Recipient
13-3746109 132-68-1092	s	\$	
RECIPIENT'S name, address, and ZIP code SHERILYN KULESH SHERILYN KULESH DESIGN	7 Nonemployee compensation	<u> </u>	This is important tax information and is being furnished to
	\$ 12601.50	\$	the Internal Revenue
17 STRINGER DRIVE	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale	10 Crop insurance prod	required to file a return, a negligence penalty or other
DOYLESTOWN, PA 18901	11	12	sanction may be imposed on you ff this income is
Account number (optional)	13 Excess golden parachute payments	14 Gross proceeds pai attorney	has not been
15	\$	\$	reported.
	16 State tax withheld \$	17 State/Payer's state	no. 18 State income
	\$	†	-

Instructions to Recipients

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 533, Self-Employment Tax, for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES, Estimated Tax for Individuals.

Individuals must report as explained below. Corporations, fiduciaries, or partnerships report the amounts on the proper line of your tax return.

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1040). If you provided significant services to the tenant, soid real estate as a business, or rented personal property as a business, report on Schedule C or C-EZ (Form 1040). For royalties on timber, coal, and iron ore, see Pub. 544, Sales and Other Dispositions of Assets.

Box 3. Generally, report this amount on line 21 of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian garning profits, or other taxable income, if it is trade or business income, report this amount on Schedule C, C-EZ, or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold at a 30% rate if you did not turnish your taxpayer identification number. See Form W-9, Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Fishermen.

Box 6. Report on Schedule C or C-EZ (Form 1040).
Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare taxes. Contact the payer if you believe you are an employee, report this amount on line 7 of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in fieu of dividends or tax-exempt interest received by your broker on your behalf after transfer of your securities for use in a short sale. Report on line 21 of Form 1040.

Box 9. If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C or C-EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 instructions for line 61.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15. Other information may be provided to you in box 15. Boxes 16-18. Shows state or local income tax withheld from the payments.

Case 1:07-cv-03477-L	AK Document 16-3		Page 4 of 50	
	state. ZIP code, and telephone no.	S Revises	* **** *******************************	Miscellane Inco
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TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	RECIPIENT'S dentification rumper	5	A	Internal Reve Service Ce
13-3746109	132-68-1092	-3		File with Form
SHERILYN KULESH SHERILYN KULESH	DESIGN	5 450 00	:u 01	For Privacy and Paperw
reat cooress uncluding apt. no.)		3 450.00	TR aeds	Reduction Notice, see 2002 Gene
17 STRINGER DRIV		11		Instructions
DOYLESTOWN, PA 1	8901	11		Forms 10 1098, 54
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	<u>-</u>	<u></u>	·	da Ou
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Form 1099-MISC			J
	CTED (if checked) (ke	ep for your records)	•
AGOSTINO VON HASSELL UPPER SALEM, ROUTE 723	I GERLS	OMB No. 1545-0115	
F.O BOYCE BOX 225	\$		Micoellana
BOYCE, VIRGINIA 22620	2 Royalties	2003	Miscellaneous Income
	S	Form 1099-MISC	39–1908647 Department of the Treasury — IRS
	3 Other income	4 Fed. Inc. tax with	held Copy B
PAYER'S Federal identification number RECIPIENT'S identification number	5 Fishing boat proceeds	5	For Recipient
	Serving Dodr proceeds	6 Medical and health of payments	are
080-60-0368 132-68-1092			
RECIPIENTS name, address, and ZIP code	\$	\$	
SHERILYN KULESH	7 Nonemployee compensation	8 Substitute payments of dividends or interes	in lieu
SHERILYN KULESH DESIGN		Or Dividends of Intere	This is important tax information and is
	\$ 350.00	\$	being furnished to the Internal Revenue
	9 Payer made direct sales of	10 Crop insurance proce	Service. If you are
17 STRINGER DRIVE	\$5,000 or more of consumer products to a buyer	moorance proce	required to file a return, a negligence
		\$	penalty or other sanction may be
DOYLESTOWN, PA 18901	11	12	imposed on you if
Account number (optional)	13 Excess golden parachute	14 -	this income is taxable and the IRS
	payments	14 Gross proceeds paid t attorney	determines that it has not been
15	\$	\$	reported.
	16 State tax withheld	17 State/Payer's state no.	18 State income
	\$ s		\$
	17		

Instructions to Recipients

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 533, Self-Employment Tax, for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES, Estimated Tax for Individuals.

Individuals must report as explained below. Corporations, fiduciaries, or partnerships report the amounts on the proper line of your tax return.

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1040). If you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business, report on Schedule C or C-EZ (Form 1040). For royalties on timber, coal, and iron ore, see Pub. 544, Sales and Other Dispositions of Assets.

Box 3. Generally, report this amount on line 21 of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. If it is trade or business income, report this amount on Schedule C, C-EZ, or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian garning profits. Generally, a payer must backup withhold at a 30% rate if you did not furnish your taxpayer identification number. See Form W-9, Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Fishermen.

Box 6. Report on Schedule C or C-EZ (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare taxes. Contact the payer if you believe you are an employee, report this amount on line 7 of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf after transfer of your securities for use in a short sale. Report on line 21 of Form 1040.

Box 9. If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C or C-EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040). Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 instructions for line 61.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15. Other information may be provided to you in box 15. Boxes 16–18. Shows state or local income tax withheld from the payments.

EXHIBIT I

Form 1099-MISC CORRECTED (if checked) PAYER'S name, street address, city, state, ZIP code, and telephone so. THE REPTON GROUP, LLC 399 PARK AVENUE NEW YORK, MY 10022		Form 1099-MISC 2	:005 ome	OMB No. 1545—0115 39–1806647 <u>Department of Treasury</u> — IRS	
		1 Rents \$	2 Royulties	3 Other income	
Tolday NI 100	NEW YORK, NY 10022		Fishing boot proceeds	Medical and health care payments	
PAYER'S Federal identification number 13-3746109	RECIPIENT'S identification number	7 Namemployee compensation \$ 3700.00	Substitute payments in lieu of dividends/ interset	B Payer made direct sales of \$5,000/rearc of consulted products to a buyer (recipient) for redails	
13-3746109 547-62-0866 RECIPIENTS Name, address, and ZIP code Keith Crossley 46 Bank Street		18 Crop Insurance proceeds \$	11	12	
		13 Excess polden parachute payments \$	14 Gress proceeds paid to an attorney	15a Section 40aA deferrals	
New York, NY 100	1.4	15b Section 408A Income.			
		16 State tax withheld \$	17 State/Payer's state no.	18 State income	
		\$		£	
Account number (see instructions)		Copy B For Recipient () This is important tax informati if you are required to file a ret on your films income is tamble	(960 for your records) on and is being furnished to the um, a regional popular profits and the IRS determine that the	Internal Revenue Service.	

THE REPTON GROUP, LLC 399 PARK AVENUE NEW YORK, NY 10022	1 Rects		Department of Treesury (F
	\$	2 Royalties	3 Other income
10022	Fed. Income tax with held	5 Fishing boat proceeds	Medical and health term payments
AYER'S Federal Identification number 13-3746109 RECIPIENT'S Identification number 547-62-0866	Nonemployee compensation \$ 3700.00	Substitute payments in lieu of dividends/ interest	products to a buyer
ECIPIENT'S name, address, and ZIP code Keith Crossley	10 Crop insurance proceeds	11	12
46 Bank Street	13 Excess golden parachute payments \$	14 Gross proceeds paid to an atturney	15a Section 409A deferrals
New York, NY 10014	15b Section 409A Income		<u>\$</u>
	18 State tax withhold	17 State/Payer's state no.	18 State Income
count number (see Instructions)			\$
FMISB21 NTF 2582013 Capyright 2005 Greetland /Nelco Form	Copy 2 To be filed with reciples	nt'a state income tax retu	

instructions to Recipients

Account number. May show an account or other enique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) tax. Amounts shown may be subject to see employment (Sc.) tel.
If your net known from soft-employment is \$400 or more, you must file a return and
compute your \$E text on 8chedule \$E (Form 1040). See Pub. 533, SelfEmployment Tax, for more information. If no income or social accurity and Nedicare Exists were with held and you are still receiving these payments, see Form 1040-ES, Estimated Tax for Individuals. Individuals must report as explained below. Corporations, fiduciaries, or partnerships report the amounts on the proper fine of

Boxes 1 and 2. Report rents from real estate on Schedule F (Form 1040). If you provided significant services to the testant, sold real arists as a business, or rented provided significant services to the resent, sold real estate as a business, or rented personal property as a business, report on Schedule C or C-EZ (Form 1945). For reyal on Simbor, post, and iron ore, see Pub. 844, Sales and Other Dispositions of Assets. Box 3. Generally, report this amount on the "Other Income" has of Form 1940 and in the Control of the Control Box 3. Generally, report this amount on the "Other income" are of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, indian gazeing profits, or other taxable income. See Pub. 525, Taxable and Nontaxable income. If it is trade or business income, report this amount on Schedule C, C-EZ, or F (Form 1040).

Box 4. Shows backup withholding or withholding on ladian gazeing profits. Generally, a payer must backup withhold at a 25% rate if you did not farmed your taxpayer identification number. See Form W-2, Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax setum as tax withhold.

Box 5. An amount in this box means the flahing boat operator considers you self-cappoyed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 585, Tax Highlights for Cummercial Fishermen.

Box 6. Report on Schedule C or C-EZ (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the cale of fish, if payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and cld not writhhold income tax or social security and Medicare taxes. Contact the payer if you believe this form is incorrect or has been issued in error. If you believe you with note income sax or social security and medicare taxes. Contact the payer in you believe this form is incorrect or has been issued in error. If you believe you are an employee, report this amount on line? of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest HORE 5. Shows substitute payments in set of dividends of tax-exempt impress received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040, Box 3. If checked, \$5,000 or more of sales of consumer products was paid to you

on a buy-sell, deposit-commission, or other basis. A dollar assount does not have Schedule C or C-EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040).

Box 13. Shows your total our persation of excess golden persohuts payments subject to a 20% sixtles tax. See the Form 1040 instructions for where to report.

Box 152. Shows current year deferrals as a nonemployee under a section 409A noncustified deferred compensation (NQDC) plan. Any sernings on current and prior ear deferrals must also be reported.

Box 15b. Shows income as a nonemployee under a NQOC plan that does not requirements of section 408A. This amount is also included in box 7 as the requirements of except work, I are ensured to see interest at the contently taxable nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This moone is also subject to a substantial additional tox to reported on Form 1046, See Total Tax* in the Form 1040 instructions. Boses 15-18. Shows state or local income tax withheld from the payments.

 $\underline{\mathbf{EXHIBIT}\ \mathbf{J}}$

Costs Related to Shipping Book From California to New Orleans

DATE TO WHOM AMOUNT COMMENT

2-Jan-07 AMEX \$1,964.25 Shipping

15-Sep-06 Logistics \$654.62 Handling Charge 15-Sep-06 Logistics \$511.30 Inland Charge

2-Feb-07 Logistics \$4,000.00 Shipping

\$7,130.17

18601 SOUTH SUZANA ROAD, SUITE A. RANCHO DOMINGUEZ, CA

INVOICE

UNIVERSITY PRESS OF THE SOUTE, INC P:504/866~2750

INVOICE NO.

:SII60900298

SALESMAN

ISSUE DATE

:15 Sep 2006

JOB NO.

: 81609000044

CST REF NO.

PRINT DATE: 06 Feb 2007

17:46:15

LOAD: HOMG KOMG

VESSEL/VOYAGE: OOCL LONG BEACH / V. 26235

DISH: LONG BEACH DEST: LONG BEACH

ETD: 04 Sep 2006 ETA: 15 Sep 2006

HBL:

ATTW:

MAIL:

HKL@86090032

-CFS : 314 CARTON(S) 5,865.00 KGS 10.260 CBM

CONTAINER NO. SEAL NO. TINU5527939

SIZE 40 1

CONTAINER NO. SEAL NO.

SIZE

DESCRIPTION

HANDLING CHARGE ADVANCE MANIFEST SECURITY FEE DDC FEE ENTRY FEE DUTY FEE BONDS TO CUSTOM	USD 50.000/SET x 1.000 USD 25.000/B/L x 1.000 USD 288.310/SHPT x 1.000 USD 125.000/SHPT x 1.000 USD 56.310/SHPT x 1.000 USD 110.000/SHPT x 1.000	1.000000 USD 1.000000 USD 1.000000 USD 1.000000 USD 1.000000 USD 1.000000 USD	50.00 25.00 288.31 125.00 86.31 110.00
		Total: USD	654.62

TOTAL: US DOLLARS SIX HUNDRED FIFTY-FOUR AND CENTS SIXTY-TWO ONLY

PREPARED BY: JULISA

PAYMENT SHOULD BE MADE IN

TROSSED CHEQGE PAYABLE TO:

FOR AND ON BEHALF OF

LOGISTICS WORLDWIDE (USA) , IRC

LOGISTICS WORLDWIDE (USA), INC

DEFICIAL RECEIPT WILL BE MADE UPON PAYMENT

AUTHORIZED SIGNATURE

E. 50.E.

THE REPTON GROUP, LLC

February 13, 2007

Via E-Mail and Regular Mail Julisa Orellane Logistics Worldwide USA 18601 S. Susana Road Rancho Dominguez, CA 90221

Dear Julisa:

Enclosed with this letter is check number 4277 for \$654.62 made out to Logistics Worldwide USA.

By endorsing and depositing this check you agree as follows:

- This is a voluntary payment for additional charges but does not impact the conditions attached to a prior check sent of January 15, 2007. Those conditions were stated as follows:
 - 5 \$4,000.00 is the only payment expected from us. There will be no other charges - either for handling or for shipping and that this constitutes the entire payment due to you.
 - That on any other charges you will be in touch with Frederick Lo. He indicated in an e-mail that he was agreeable to this and considers the amount of \$4,000.00 to be reasonable.

Sincerely.

Agostino von Hassell

Enclosure: Check 4277 for \$654.62 Copy to Frederick Lo

GRADING ALLEGA TOBERS grand great of the later of

REMONOFICES

Filed 04/08/2008

4277

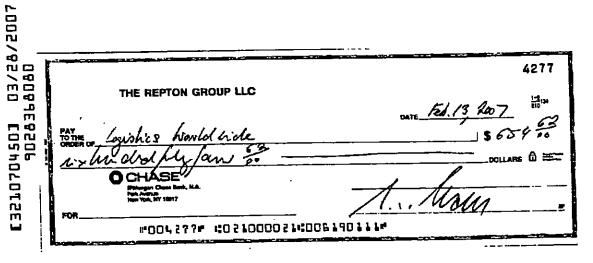
Page 12 of 50

Logistics Worldwide USA

\$654.62 13-Feb-07

031000040 03/29/2007 6114737610

This is a LEGAL COPY of your check. You can use it the same way you would use the original check.



4:0210000214

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Case 1:07-cv-03477-LAK Document 16-3 Filed 04/08/2008 Page 13 of 50

Logistics Worldwide USA

\$654.62 13-Feb-07

4277

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Filed 04/08/2008 Page 14 of 50

Logistics Worldwide USA

\$4,000.00 15-Jan-07

4257

031000040 02/16/2007 6615737936

This is a LEGAL COPY of your check. You can use it the same way you would use the original check.

14503 02/15/2007 9025469330 4257 THE REPTON GROUP LLC \$ 4000 00 DOLLARS & SE #00425?# #021000021#906190111#

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Logistics Worldwide USA \$4,000.00 15-Jan-07 4257 @IAIAI@# 051699651 05162997 0238 ↓.enil sirb woled effry to estobne fon o()↓ 02/15/2007 ,9330 2002 100 16/2007) >32,070,55< >05+07015£ < 90U T0181 40 09#46100 40000TE0* *0310004

Page 15 of 50

Filed 04/08/2008

10/03/2006

January 2, 2007 Page 3

Copy of charge being paid

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ROLAND AQUINO STG

1650 S. CENTRAL AVE. COMPTON CA 90220 US

Recipient Information

UNIVERSITY PRESS OF SOUTH-ROO 4700 TCHOUPITOULIS ST.

NEW ORLEANS, LA 70115 US

Original Reference

Customer Reference#

191925-6 SPEEDMARK

Department#

RMA#

Reference #2 Reference #3

Shipment Details

Shipmont Date	
Payment Type	Third Parly
	FedEx Standard
Service Type	Overnight
Region Code	07
Package Type	~ •
Pieces	Customer Packaging
Rated Weight	1
45	84.0 lbs
Bundle ID	3379658
Meter No	
Declared Value	3456540
	0.00

f refreportation		
Charge		191.35
Fuel Surcharge		1750.90
Courier Pickup		4.00
Charge		0.00
Weekday Delivery	USD \$	1846.25
Total Chames		

Proof of Delivery ! The

Delivery Date	10/04/2008 10:50
Service Area	A1
Code	STORAGE ROOM
Signed By	5005

FEDEX CUSTOMER SERVICE #1-800-822-1147 FROM: ROLAND AGUINO 90220 FEDEX #859231715000 CLOSTER SIGN & TRAVEL® / EXTENDED PAYMENT OPTION 001 STANDARD PKQ-64LB AWB888854460515 10004 ROC No. 8854460515 FEDEX CUSTOMER SERVICE #1-800-522-1147 002 STANDARD PKG 64LB AW8859231715000 FROM: DR ALAIN SAINT SVENI 70115 TO: FRANCES TAVERN MUSEUM NY FIOC No. 9231715000 CAFETERIA HUDBON HOTEL NEW YORK NY SIGN & TRAVEL® / EXTENDED PAYMENT OPTION SIGN & TRAVEL® / EXTENDED PAYMENT OPTION FOOD AND BEVERAGE Z

246.75

FEDEX #658654460515 CLOSTER

191925-6 SPEEDMAR 70115

TO: UNIVERSITY PRESS OF SOUTH-ROOLA

Communed on next pay

November 15, 2006

TO:

Julisa Orellane

Logistics Worldwide (USA) Inc

FROM:

Agostino von Hassell

SUBJECT:

Book Shipment Issues

Let me quickly respond to you e-mail of yesterday:

Dear Mr. Von Harrsell,

I will give you a call tomorrow morning. Regarding this shipment. Shipment didn't clear custom until 10/29/06 in the afternoon. On Sept. 30th I called Lisa to inform her the shipment was clear and that I needed a letter from her staten that you needed 72 boxes to go overnight. I didn't get this letter until Oct. 02nd. I inform you there will be some warehouse charge not my charge but warehouse for segregation etc. I received a letter from you stated to charge your American Express Card. We used your Fedex account wish minds you should of check these charges. Yes I inform you of warehouse charges. Which I have billed you already. I did release 239 carton that arrive in New Orleans already.

Fredrick inland charges are \$511.30

I will call you tomorrow.

Best regards, Julisa O.@ LWW USA

Please do note that your statements are somewhat in-accurate.

18601 SOUTH SUSANA ROAD, SUITE A, RANCHO DOMINGUEZ, CA TEL: 1-310-508-0860 FAX: 1-310-508-0862

PARAMOUNT PRINTING CO LTD C/O RAINBOW GRAPHIC & PRINTING 3 CHOM KNOWS ST . TWO IND. EST

TRO, NY. BK

INVOICE NO.

: SI16090020T

MACRICAR ISSUE DATE

JOB NO.

:15 8ap 2006

CST REF NO.

: BI609CDD044

ATTN:

PARIL:

PRINT DATE: 28 Nov 2006 12:36:21

LOAD: HOME KOME

VESSEL/VOYAGE: OOCL LONG BEACH / V.26E35

DISH: LONG BEACH

DEST: LONG BEACH

ETD: 04 Sep 2006 ETA: 15 Sep 2006

HBL:

HAL636090032

-CFS: 314 CARTON(S) 5,865.00 NGS 10.260 CEM

CONTAINER NO. SEAL NO.

SIRE

CONTAINER NO. SEAL NO. SIER

TINU5527939

40

DESCRIPTION

INLAND CHARGE

USD 511.300/SEPT x 1.000

AMOUNT 1.000000 USD

511.30

Total: USD 511.30

TOTAL: US DOLLARS FIVE EURORED ELEVEN AND CENTS THIRTY ONLY

PREPARED BY: JULISA

PAYMENT SHOULD BE MADE IN

CROSSED CHEQUE FATABLE TO:

LOGISTICS WORLDWIDE (USA), INC

OFFICIAL RECEIPT WILL BE MADE UPON PAYMENT

FOR AND ON BEHALF OF

LOGISTICS WORLDWIDE (USA), DRC

AUTHORIZED SIGNATURE

. ₹.£0.E.

EXHIBIT K

SOUTHERN DISTRICT OF NEW YORK	.X	
CHRISTINA AUGUSTIN VON HASSELL a/k/a AGOSTINO VON HASSELL,	: :	07 Civ. 3477 (LAK)
Plaintiff,	:	07 CIV. 5477 (LAK)
- against -	:	DECLADATION
ALAIN SAINT-SAENS and UNIVERSITY PRESS OF THE SOUTH, INC.,	:	DECLARATION
Defendants.	: : X	

Robert Solomon says:

- 1. I am an attorney duly admitted to practice law in the State of New York, and I make this declaration in support of Plaintiff's application for damages in the above-entitled case. I am fully familiar with the facts set forth herein.
- 2. During the period for November 2006 to August 2007 (the "Period"), I provided legal services to Agostino von Hassell in connection with his book entitled Military High Life: Elegant Food Industries and Recipes (the "Book"). These services included advising Mr. von Hassell about issues relating to a publishing agreement he signed relating to the Book, negotiating proposed revisions to that publishing agreement with the publisher, defendant University Press of the South, Inc., drafting revised publishing agreements, advising Mr. von Hassell regarding distribution and copyright issues relating to the Book and the publishing agreement, discussions with defendants regarding their compliance with the terms of the publishing agreement, and analyzing and advising on various legal issues relating to the publishing agreement and Mr. von Hassell's dealings with both defendants.

Page 22 of 50

- 3. I have reviewed my billing statements for these matters. Based on my review, Mr. von Hassell paid to me a total of \$14,420.50 for legal services relating to the Book as summarized above. I have attached hereto as Exhibit A redacted copies of my billing statements reflecting that I billed Mr. von Hassell and that he paid me such amounts. (These statements also reflect additional amounts billed to him for other services.) I have redacted these billing statements in the interest of ensuring that the attorney-client privilege is maintained.
- I declare under the penalty of perjury that the foregoing statements set forth 4. herein are true and correct.

Executed on: March 10, 2008

Robert Solomon

Case 1:07-cv-03477-LAK Document 16-3 Filed 04/08/2008 Page 23 of 50

EXHIBIT A

> November 30, 2006 Bill Number 00252 File Number 015837-00100

Agostino vo The Repton 399 Park Av 26th Floor New York, M	Group LLC		* ************************************	İ	nea gair ann ann agus aig mar ann an deann an an an an ann an an an an an an an	
Re: Gene	ral Representation					
For Profess	ional Services		, companies o	englande eller i bellegen eller eller eller eller som bellegen eller jande staden eller jande staden eller som		
11/17/2006	RNS			managan ang mang mang mang mang mang man		
11/21/2006 11/28/2006					gar — In a last of manage statement, which also is spell than a financial couple and statement.	- -
			The second secon			
11/29/2006	RNS					
11/30/2006	RNS					
,. -				Total Legal Services	\$1,755.00	
				. otal Eegal Oct viocs	4 11. 00.00	
	and the second s	n. 1-			, appropria , responsable - min C - Marrison - r	, mà 41
Total	New Charges				\$1,765.00	
Previo	ous Balance				\$0.00	
11/17/2006	Payment Retainer		RED_{ACTED}		\$-2,500.00	
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> December 31, 2006 Bill Number 00285 File Number 015837-00100

Total Legal Services

\$6,030.00

Agostino von Hassell The Repton Group LLC 399 Park Avenue 26th Floor New York, New York 10022

Re: General Representation

For Professional Service	:es	
12/01/2006 RNS	•	
12/04/2006 RNS		
12/05/2006 RNS	, , , , , , , , , , , , , , , , , , , ,	- The state of the
12/06/2006 RNS	ma manifesta, an languaga de la servició de la contracta de la contracta de la companya del companya de la companya de la companya del companya de la compan	and the second s
12/07/2006 RNS	ren una demonstrato de la deserción de los los los parametes depresar la la las los los mades. El de- umo	Appropriate time
12/08/2006 RNS 12/11/2006 RNS		e complementario de la completa del completa de la completa del completa de la completa del la completa de la completa de la completa de la completa del la completa de la completa de la completa del la comple
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12/15/2006 RNS		
12/18/2006 RNS	· •	
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12/20/2006 RNS	The state and the state of the	
12/21/2006 RNS		
	-	Total Hours 13.40

REDACTED

> January 31, 2007 Bill Number 00353 File Number 015837-00100

Agostino von Hassell The Repton Group LLC 399 Park Avenue 26th Floor New York, New York 10022

Re:	Gener	al Representation	The same of the sa		together over all to be 7 miles than 19
For	Profess	ional Services			pa ad Ners E
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	/2007	RNS			and the second s
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	5/2007 2/2007	RNS RNS	The principality and up the department of the second partment and beauty and beauty and the second partment of the		and the second s
1/26	5/2007	RNS	· Design of the second		والمساوية والمتناب المتاريق
1/3	1/2007	RNS			
				Total Hours	3.30
			То	tal Legal Services	\$1,485.00
	Total	New Charges			\$1,485.00
•		•			
1/2	2/2007	Payment			\$-5,000.00
	Total	Payments and Cre	dits		\$-5,000.00

Disbursements		
Phone calls with publisher		\$2.50
	Total Expenses	\$2.50
Total New Charges	_	\$6,032.50
12/18/2006 Payment		\$-2,500.00
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and the second s	and the second s	

 RED_{ACTED}

> February 28, 2007 Bill Number 00431 File Number 015837-00100

Agostino von Hassell The Repton Group LLC 399 Park Avenue 26th Floor New York, New York 10022

Re:	Gene	ral Representation	,		
	00/10	idi representation ;	. Here is the first of the firs		
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		sional Services		a the same and the	• • • • • •
2/06/2	2007	RNS			
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2/26/2		RNS			
2/28/2	2007	RNS			
				Total Hours	3.20
			т	otal Legal Services	\$1,440.00
Disbu	rsem	ents			
					\$1.00
					\$7.00
				Total Expenses	\$8.00
	Total	New Charges		_	\$1,448.00
	-				ر .
2/21/2	2007	Payment			\$-2,000.00
	Total	Payments and Cre	dits	_	\$-2,000.00

> March 31, 2007 Bill Number 00453 File Number 015837-00100

Agostino von Hasseli The Repton Group LLC 399 Park Avenue 26th Floor New York, New York 10022

Re: Ger	or Professional Services			
			ر مستوف ومست میونده و به و نظام مستود موروع که معوند، مو	
For Profe	ssional Service	s	• •	
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3/15/200	7 RNS	والمحاري المحتر والمراج والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمحتر والمراجع والمراجع والمراجع	A CANADA CARABA	n dag grand dag (n. n. n. dag samak r) an na sarah
3/19/200	7 RNS	The second secon		
			٠٠	
			Total Hours	4.50
			Total Legal Services	\$2,025.00
То	tal New Charges			\$2,025.00
				-
3/19/20	07 Payment			\$-1,000.00
To	tal Payments and	d Credits		\$-1,000.0C

REDACTED

> April 30, 2007 Bill Number 00548 File Number 015837-00100

Agostino von Hassell The Repton Group LLC 399 Park Avenue 26th Floor New York, New York 10022

Re: General Representation

For Professional Services

4/02/2007 RNS

Total Hours 1.20
Total Legal Services \$540.00

Total New Charges

\$540.00

July 31, 2007

Bill Number

00777 File Number 015837-00100

Agostino von Hassell The Repton Group LLC 399 Park Avenue 26th Floor New York, New York 10022

Re: General Representation

For Professiona	l Services		
7/19/2007 RNS	S	4 × 1	يوسيد بين پردون درون د مورود درون يوسيد
7/19/2007 RNS	S	which the same was a second to the same and	. <u>.</u>
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7/23/2007 RN	s		
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7/23/2007 RN 7/25/2007 RN		and the second section of the second section of the second section of the second section of the second section	and the second s
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7/27/2007 RN	IS	and the second s	
7/31/2007 RN	IS The second control of the second control		
		Total Hours	8.1C
		Total Legal Services	\$3,645.0C
Disbursements			
Dispuisements			\$2.00
		Total Expenses	\$2.00
Total New	r Charges		\$3,647.00

> August 31, 2007 Bill Number 00902 File Number 015837-00100

The Re 399 Par 26th Flo	o von Hass epton Group rk Avenue oor ork, New Yo	LLC			
			ing the control of th		
Re: G	Seneral Rep	resentation			
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8/01/20	007 RNS		·		
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8/03/20	007 RNS		!		
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8/09/20	007 RNS				
			and the second of the second o		
8/10/20	107 DNO				
8/13/20	· · · · · · -				
0/15/20	ioi idas		Total Hours	2.20	
				3.20	
			Total Legal Services	\$1,440.00	
Disburs	sements	•			
				\$3.00	
			Total Expenses	\$3.00	
Тс	otal New Ch	arges		\$1,443.00	
		-			
			•		

Rainbow Graphic & Printing Company Limited 彩虹製版印刷有限公司 a wholly-owned subsidiary of Next Media Limited 查傳媒有限公司全資附屬公司

8 Chun Ying Street, 4/F. Tseung Kwan O ind. Estate Kowloon, Hong Kong Telephone: (852) 2752-3418 Facsimile: (852) 2897-4890 香港九龍將軍漢工業等西遊盈街8號4樓

INVOICE

Messrs. Contacto Atlantico Invoice No. 0609004A AV. Marginal 6912, 2765-587 Estoril, 2765-588 Portugal Date:4-September-2006-----Attn: Agostino von Hassell Quantity Description **Unit Price** Amount No.P/617971+A Film Making & Printing For:-Military High Life No.P/810056 No.P/124523 1,000cps US\$ 4,350.00 U. S. DOLLARS FOUR THOUSAND THREE HUNDRED FIFTY ONLY. TOTAL US\$ 4,350.00

> For and on behalf of Rainbow Graphic & Printing Co., Ltd.

Terms of Payment within AXXX tays from the above the C.O.D. Interest of 1% per month will be charged to all overdue amount.

Cheque should be crossed and paid to the order of Rainbow Graphic & Printing Co., Ltd.

Leelenet

8 Chun Ying Street, 4/F, Tseung Kwan O Ind. Estate Kowloon, Hong Kong Telephone: (852) 2752-3418 Facsimile: (852) 2897-4890 香港九龍將軍澳工業邨西联盈街8账4攜



Rainbow Graphic & Printing Company Limited 彩虹製版印刷有限公司 a wholly-owned subsidiary of Next Media Limited 变傳媒有限公司全資附屬公司

INVOICE

Messrs. The Repton Group LLC

Invoice No. 0609004B

399 Park Avenue, 26th Floor,

New York, NY 10022, USA

Date: 4 September 2006

Quantity	Description	Unit Price	Ame	ount
No.P/617971+A	Film Making & Printing For:-			
No.P/810056	Military High Life			
No.P/124523	5,000cps Run-on 40 copies Barcode for Cover Film correction on July 30 Courier 40 copies to 4 destination 1,000 copies sea-freight to Portugal		USS USS USS USS USS USS	21,750.6 140.6 8.6 182.6 400.6 350.6
U. S. DOLLARS TWI	ENTY-TWO THOUSAND EIGHT HUNDRED THIRTY ONLY. TOTAL	1	US\$	22,830.

For and on behalf of Rainbow Graphic & Printing Co., Ltd.

Terms of Payment within 1000 and the above date/C.O.D. interest of 1% per month will be charged to all overdue amount.

Cheque should be crossed and paid to the order of Rainbow Graphic & Printing Co., Ltd.

Filed 04/08/2008

Page 35 of 50

8 Chun Ying Street, 4/F. Tseung Kwan O Ind. Estate Kowloon, Hong Kong Telephone: (852) 2752-3418 Facsimile: (852) 2897-4898 香港九龍將軍澳工業邨西駿盈街8號4樓

Rainbow Graphic & Printing Company Limited 彩虹製版印刷有限公司 a wholly-owned subsidiary of Next Media Limited 查傳媒有限公司全資附屬公司

INVOICE

Messrs. The Repton Group LLC

399 Park Avenue, 26th Floor,

Invoice No. 0604001

New York, NY 10022, USA Attn: Agostino von Hassell

Date: 10 April 2006

Quantity	Description .		Unit Price	Amount	
No.P/617655	Film Making & Proof For:- Military High Class Book 5 pages 4C x two kind of paper stock			USS	250.0
U.S. DOLLARS TO	Payment by Telegraphic transfer Banker: HSBC Swift No.: HSBCHKHHHKH Bank Address: 673 Nathan Road, H.K. Account No.: 534-089-313-274 Account Name: Rainbow Graphic & Printing Co Ltd				
	O HUNDRED FIFTY ONLY.	TOTAL		USS	250 . 00

Terms of Payment within 30 days from the above date/C.O.D. Interest of 1% per month will be charged to all overdue amount. Cheque should be crossed and paid to the order of Rainbow Graphic & Printing Co., Ltd.

For and on behalf of Rainbow Graphic & Printing Co., Ltd. EXHIBIT L

Form 1099-MISC PAYER'S name, street address, city, sta	CORRECTED (if checked)	Form 1099-MISC 2 Miscellaneous inco		OMB No. 1545-0115 39-1908647 Department of Treasury IRS		
AGOSTINO VON HASSELL UPPER SALEM, ROUTE 723 P.O BOYCE BOX 225 BOYCE, VIRGINIA 22620		1 Rents \$	2 Royalties	3 Otherincome \$		
		4 Fed. Inc. tax withheld \$	5 Fishing bast praceeds \$	6 Medical and health care payments		
PAYER'S Federal Identification number	RECIPIENT'S identification number	7 Nonemployee compensation \$ 1000.00	8 Substitute payments in lieu of dividends/interest \$	9 Payer made direct sales of \$5,000/more of consumer products to a buyer (recipient) for resale		
080-60-0368 RECIPIENT'S name, address, and ZIP or	117-52-0869	10 Crop Insurance procesds	11	12		
HARRY MCMANN		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney	15a Section 409A deferrals		
408 LAKEWOOD AVE	NUE	15b Section 409A Income\$				
BALTIMORE, MD 21224		16 State tax with held	17 State/Payer's state no.	18 State income		
Ì		\$		\$		
Account number (see instructions) ,		Copy B For Recipient (This is important tax informat if you are required to file a ret on you if this income is taxab	keep for your records) ion and is being turnished to th urn, a negligence penalty or oth e and the IRS determines that i	e Internal Revenue Service. er sanction may be imposed t has not been reported.		

Form 1099-MISC PAYER'S name, street address, city, state		Form 1099-MISC 2 Miscellaneous Inco		OMB No. 1545-0115 39-1808847 Department of Treasury IRS	
AGOSTINO VON HASSELL UPPER SALEM, ROUTE 723 P.O BOYCE BOX 225 BOYCE, VIRGINIA 22620		1 Rents	2 Royalties \$	3 Other income	
		4 Fed. Income tax with held \$	5 Fishing boat proceeds	6 Medical and health care payments	
PAYER'S Federal identification number	RECIPIENT'S Identification number	7 Nonemployee compensation 1000.00	8 Substitute payments in lieu of dividends/ interest	9 Payer made direct sales of \$5,000/more of consumer products to a buyer (recipient) for resale	
080-60-0368	117-52-0869	10 Crop Insurance proceeds	11		
RECIPIENT'S name, address, and ZIP co	de	\$	A 64-141 TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE		
HARRY MCMANN		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney	152 Section 409A deferrals	
		\$	<u> \$</u>	\$	
408 LAKEWOOD AVE	NUE	15b Section 409A Income\$			
BALTIMORE, MD 21	224	16 State tax with held	17 State/Payer's state no.	18 State income	
, ·		\$	l	\$	
		\$		\$	
Account number (see instructions)		Copy 2 To be filed with reciple	nt's state income tax retu	rm, when required.	

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Instructions to Recipients

5 FMISB2I

Account number. May show an account or other unique number the payer assigned to distinguish your account.

NTF 2582013

Amounts shown may be subject to self-employment (SE) tax. If your not income from solf-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 533, Self-Employment Tax, for more information. If no Income or social security and Medicare Corporations, fiduciaries, or partnerships report the amounts on the proper line of your tax return.

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1040). If you provided significant services to the lenant, sold real estate as a business, or rented personal property as a business, report on Schodule C or C-EZ (Form 1040). For royaltles personal property as a business, report on Schedule C or C-E2 (Form 1040). For royaltes on timber, coal, and iron ore, see Pub. 544, Sales and Other Dispositions of Assets.

BOX 3. Generally, report this amount on the "Other income" line of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525, Taxable and Nontaxable Income. If it is trade or business income, report this amount on Schedule C, C-E2, or F (Form 1040).

BOX 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold at a 28% rate if you did not furnish your taxpayer identification number. See Form W-9. Request for Taxoaver Identification Number

identification number. See Form W-9. Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax return as tax with hald.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Fishermen.

Box 6. Report on Schedule C or C-EZ (Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare taxes. Contact the payer if you believe this form is incorrect or has been issued in error. If you believe you are an employee, report this amount on line 7 of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in lieu of dividends or tex-exempt interest received by your broker on your behalf as a result of a loan of your securities.

Report on the "Other income" line of Form 1040.

BOX 9. If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C or C–EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 instructions for where to report.

BOX 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15a. Shows current year deferrals as a nonemployee under a section 409A nonqualified deterred compensation (NQDC) plan. Any earnings on current and prior year deterrals must also be reported.

Box 15b. Shows income as a nonemployee under a NQDC plan that does not meet the requirements of section 409A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable is also included in this box. This income is also subject to a substantial additional tax to reported on Form 1040. See "Total Tax" in the Form 1040 instructions. Boxes 16-18. Shows state or local income tax withheld from the payments.

PAYEH'S name, street address, tity, state, ZIP code, and telephone no. THE REPTON GROUP, LLC 399 PARK AVENUE NEW YORK, NY 10022		Form 1099-MISC 2 Miscellaneous Inc		DMB No. 1545-0115 39-1908647 Department of Treasury IRS
		1 Rents	2 Royalties	3 Other income
		4 Fed. Inc. tax withheld \$	Fishing boat proceeds	6 Medical and health core payments
PAYER'S Federal Identification number 13-3746109		7 Nonemployee compensation \$ 5300.00	Substitute payments in liquid of dividends/ interest \$	products to a buyer
RECIPIENT'S name, address, and ZIP code Harry McMann		10 Crop Insurance proceeds	11	12
		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney	15a Section 408A deferrale
408 Lakewood Ave		15b Section 408A income		\$
Baltimore, MD 21	224	16 State tax withhold	17 State/Payer's state no.	18 State income
ļ		\$		\$
Annual market and a second		\$		\$
Account number (see instructions)		Copy B For Recipient () This is important tax informati If you are required to file a rep or you if this income is taxable	(96D for your racords) on and is being furnished to the ura, a regulatorica pensity or oth eard the IRS determines that it	internal Revenue Service. of sunction may be imposed that not been recorded.

	2005 xome	OMB No. 1545-011 39-190864
1 Rents	2 Royalties	3 Other income
\$	5 Fishing bostproceeds	Medical and health care payments
- compensation	Substitute payments in iteu of dividends/ interest	Payer made direct sales of \$5,000/more of consumer products to a buyer (recipient) for resale
\$ Crop insurance proceeds	11	
13 Excess golden parachuta pryments \$	14 Gross proceeds paid to an attorney	158 Section 409A deferrals
15b Section 408A Income		\$
16 State tax withheld	17 State/Payer's state no.	18 State income
\$		\$
Copy 2 To be filed with reciple	Fil's state income tex retu	
	## Fed. Income tax withheld ## 5300.00 ## 18 Crop Insurance proceeds ## 13 Excess golden parachute ## payments ## 15b Section 408A Income. ## 16b State tax withheld ## Copy 2	## Fed. Income tax withheld 5 Fishing bost proceeds 5 7 Nonemployee compensation 5 300.00 10 Crop insurance proceeds 1 13 Excess golden parachute payments 14 Gross proceeds payments 15 5 5 5 5 5 5 5 5

instructions to Recipients

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) text.
If your not income from self-employment is \$400 or mare, you must file a return and compute your 8E tax on Schedule 8E (Form 1040). See Pub. 533, Self-Employment Tax, for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES, Estimated Tax for individuals, individuals must report as applicable believe. Estimated Tax for individuals, individuals must report as explained below.

Corporations, fiduciaries, or partnerships report the amounts on the propersions

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1849). If you Boses 1 and 2. Report rants from real estate on Schedule E (Form 1040). If you provided significant services to the tesant, sold real estate as a business, or ranted personal property as a business, report on Schedule C er C—EZ (Form 1040). For royalties on timber, oost, and iron one, see Pub. 644, Sales and Other Dispositions of Assets.

Box 3. Generally, report this amount on the "Other income" into of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, tomble damages, indian gaming profits, or other taxable income. See Pub. 525, Taxable and Northxable Income. If it is trade or business income, report this amount on Schedule C, C—EZ, or F (Form 1040). Box 4. Shows backup withhold at a 25% rate if you did not furnish your taxpayer and Cartification number. See Form W—9, Request for Taxpayer identification number. See Form W—9, Request for Taxpayer identification Number and Cartification, for more information. Report this amount on your income tax return as tax with hald.

Box 5. An amount in this box means the fishing best operator considers you

Tax returns as use with name.

Box 5. An amount in this box means the fishing best operator considers you self-employed. Report this amount on Schedule Cor C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Flahermen. BOX 6. Report on Schedule C or C-EZ (Form 1040).

Doux /- Shows nonemproyee compensation. If you are in the trade or outsiness or catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-Z because the payer did not consider you an employee and cld not withhold income tax or social security and Medicary taxes. Contact the payer if you believe this form is incorrect or has been issued in error. If you believe you are an employee, report this amount on line? of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes. Information on now to report any social security and Medicare taxes. Book 8. Shows substitute payments in Reu of dividends or tax-exampt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Form 1040.

BOX 9. If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit—commission, or other basis. A dollar amount does not have to be shown, Generally, report any income from your sale of these products on Schedule C or C-EZ(Form 1040).

Recy 10. Constitution of the product of the selection of the products on Schedule C or C-EZ(Form 1040).

Box 7. Shows nonemployee compensation. If you are in the trade or business of

Box 10. Report this amount on ane 6 of Schedule F (Form 1040).

Box 13. Shows your total compensation of excess golden parachate payments subject to a 20% excise tax. See the Form 1040 instructions for where to report. Story 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the toxable parts income on year return.

Box 15.3. Shows current year deferrals as a nonemployee under a section 408A noncusalistic deferred compensation (NQDC) plan. Any earnings on current and prior

year deferrate must also be reported.

year deriminate interest properties.

Box 18b. Shows income are a nonemployee under a NQDC plan that does not meet the requirements of section 408A. This amount is also included in box 7 as nonemployee compensation. Any amount included in box 15a that is currently taxable in the properties of the pr is also moluded in this box. This income is also subject to a substantial additional tax to reported on Form 1040. See "Total Tex" in the Form 1040 instructions. Boxes 16-18. Shows state or local income tax withheld from the payments.

Form 1099-MISC	☐ CORRE	CTED (if checked) (ke			4 2
PAYER'S name, street address, city, str AGOSTINO VON HAS	ite, ZIP code, and telephone no	1 Rents	OMB No. 1545-0115]	
UPPER SALEM, ROU P.O BOYCE BOX 22 BOYCE, VIRGINIA	TE 723 5	\$ 2 Royalties	2003		Miscellaneous Income
		\$	Form 1099-MISC	Departm	39-1908647 nent of the Treasury IRS
		3 Other income	4 Fed. inc. tax wi	thheld	Copy B
PAYER'S Federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health payments	care	For Recipient
080-60-0368	117-52-0869	\$	s		
RECIPIENT'S name, address, and ZIP co HARRY MCMANN	de	7 Nonemployee compensation	<u> </u>	ts in lieu rest	This is important tax information and is
		\$ 2369.84	 \$	ļ	being furnished to the internal Revenue
408 LAKEWOOD AVEN	NUE	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer	10 Crop insurance proc	eeds	Service. If you are required to file a return, a negligence penalty or other
BALTIMORE, MD 212	224		12		sanction may be imposed on you if this income is
Account number (optional)		13 Excess golden parachute payments	14 Gross proceeds paid attorney	d to an	taxable and the IRS determines that it has not been
15			\$		reported.
		16 State tax with held \$	17 State/Payer's state n	10.	18 State income
		\$			\$

Instructions to Recipients

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 533, Self-Employment Tax, for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES, Estimated Tax for Individuals.

Individuals must report as explained below. Corporations, fiduciaries, or partnerships report the amounts on the proper line of your tax return.

Boxes 1 and 2. Report rents from real estate on Schedule E (Form 1040). If you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business, report on Schedule C or C-EZ (Form 1040). For royalties on timber, coal, and iron ore, see Pub. 544, Sales and Other Dispositions of Assets.

Box 3. Generally, report this amount on line 21 of Form 1040 and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. If it is trade or business income, report this amount on Schedule C, C-EZ, or F (Form 1040).

Box 4. Shows backup withholding or withholding on indian gaming profits. Generally, a payer must backup withhold at a 30% rate if you did not furnish your taxpayer identification number. See Form W-9, Request for Taxpayer Identification Number and Certification, for more information. Report this amount on your income tax return as tax withheld.

Box 5. An amount in this box means the fishing boat operator considers you self-employed. Report this amount on Schedule C or C-EZ (Form 1040). See Pub. 595, Tax Highlights for Commercial Fishermen.

Box 6. Report on Schedule C or C-EZ (Form 1040).
Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If payments in this box are SE income, report this amount on Schedule C, C-EZ, or F (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare taxes. Contact the payer if you believe this form is incorrect or has been issued in error. If you believe you are an employee, report this amount on line 7 of Form 1040 and call the IRS for information on how to report any social security and Medicare taxes.

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf after transfer of your securities for use in a short sale. Report on line 21 of Form 1040.

Box 9. If checked, \$5,000 or more of sales of consumer products was paid to you on a buy-sell, deposit-commission, or other basis. A dollar amount does not have to be shown. Generally, report any income from your sale of these products on Schedule C or C-EZ (Form 1040).

Box 10. Report this amount on line 8 of Schedule F (Form 1040), Box 13. Shows your total compensation of excess golden parachute payments subject to a 20% excise tax. See the Form 1040 instructions for line 61.

Box 14. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 15. Other information may be provided to you in box 15. Boxes 16-18. Shows state or local income tax withheld from the payments.

INVOICE -No. INVOICE DATE CUSTOMER'S ORDER NO. SOLD TO: SHIP TO: JGUSTWO VON HASSELL 2 SUTTON PLACE SOUTH 10052 SALESPERSON SHIPPED VIA TERMS F.O.B. QTY. ORDERED | QTY. SHIPPED 85000

INVOICE

Adams NC2872

PUE:

INVOICE____

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INVOICE DATE	
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CUSTOMER'S V	
OHDEH NO. 37	A CONTRACTOR OF THE PROPERTY O

SOLD TO:
AGOSTINO VON HASSELL - FOR-MILITARY FOOD

2 SUTTON PL. SO.
NEW YORK, NY 10027

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SALESPERSON	SHIPPED VIA	TERMS	F.O.B.	
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QTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	иома	NT
		FOOD, SUPPLIES		269	; -
		STUDIO, LOCATION DAY	21/2	1100	
		SHOPPING, PREPRO DAY.	1	250	∞
		SUBTOTAL		1619	89
		PAID		1450	∞
3 adams NC2872		DUE		169	89

adams NC2872

INVOICE SOC. SEC. # 117-52-0869

OTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	AMOUNT
		STUDIO DAY (4)		1700 00
		STUDIO DAY (4) HOTEL (2 DAYS) FOOD		126 94
		FOOD		198 04
		TOTAL	 	2024 98
adams NC2872	: <u></u>	INVOICE	1	

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INVOICE_

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THE REPONGROUP - FOR-MILITARY FOOD

399 PARK AVE, 20TH FLOOR

NEW YORK NY 10022

SHIP TO:	
	 <u> </u>
	<u>. </u>

SALESPERSON	SHIPPED VIA	TERMS	F.O.B.	
		NET 30		

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	PER DIEM			600 00
	SHOPPING PRE-PRU			150 00
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	TRAVEL, LODGING			550 81
	ha !	T6TAL		596984
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	170m	DUF		236994

INVOICE encolesses processes de la companya del companya de la companya del companya de la companya del la companya de la companya

Harry McMann

408 N. Lakewood Ave.
Baltimore, MD 21224-1112
2 410.276.0816
www.food-styling.com

Invoice

Page 44 of 50

Invoice No. 704

Invoice Date: 3.19.07

For: Millitary Food

Bill to:

Agostino von Hassell The Repton Group 399 Park Ave. 20th Floor New York, NY 10022 212-750-0824

			Extended
Description	Qty	Price	Amount
Food/Supplies	1	\$264.89	\$264.89
Airfare	1	\$109.80	\$109.80
Car Rental	1	\$179.07	\$179.07
Hotel	1	\$399.10	\$399.10
Equipment Rental	1	\$37.77	\$37.77
Parking/Tolls	. 1	\$26.00	\$26.00
Shopping/Prep	. 1	\$550.00	\$550.00
Location Day	1	\$550.00	\$550.00
Per Diem	2	\$40.00	\$80.00
	<u> </u>		
Subtotal	1	\$2196.63	\$2196.63
Paid	1'	-\$1500.00	-\$1500.00

Total Due: \$696.63

Make check payable to: Harry McMann

Thank you!

	Assistants 2005	
11	Assistants 2000 Jan. 3 Leolie J-B/Food Book Jan. 5 Hang He Hamm Jan 7 MM Consult 49 Jahie J-B/Food Book 66 Lloke J-B/Food Book 71 Lune J-B/Monety 93 Burun Wel. 916 K. Boelen 224-29-0808 926 Simone 103 Toreson Cards #1128 105 You am 647-40-3553 115 K. Boelen 12 16 S. Kulesh #1267 1219 Leuli J-B 1227 Town 1230 MM Coroutt	229069 236989 62500 182500 711053 30000 50000 50000 30000 30000 25000 30000 25000 30000 25000 30000 10000 10000 10000 10000 10000 10000 152500

	Assistants 2007	
	Assistants 200 3 Jan. 3 Leokie J-B/ Food Book Jan. 5 Hany Hickarm Jan. 7 MM Consult Bright 1 23 MM Consult 4 9 Lakie J-B/ Food Book 66 Leokie J-B/ Food Book 71 Leukie J-B/ Moneby 93 Burney Wel. 916 K. Boelen 224-29-0808 926 Simone 926 Simone 926 Simone 103 Foresge Cards #1128 105 Youldon 647-40-3553 115 K. Boelen 12 5 Leukie J-B 12 16 S. Kalesh #1267 12 19 Leuki J-B 12 22 Yourn 12 30 MM Coroult	229069 236984 62500 7110 53 30000 550000 550000 50000 30000 2749974 35000 50000 100000 2934974 152500
1		

Harry McMann

408 N. Lakewood Ave.
Baltimore, MD 21224-1112

410.276.0816 410.276.1485

www.food-styling.com

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CUSTOMER'S ORDER NO.

SOLD TO:	
THE KEPBNGROUP - FOR	- MILITARY FOOD
399 PARK AVE, 20	TH Finns
NEW YORK NY	10022
- TURK TO	100 2 2

SHIP TO:		 	
		 -	

SALESPERSON	Tourse		
	SHIPPED VIA	TERMS	Trop -
		J	F.O.B.
		NET 30	}
	<u> </u>	<u> </u>]
QTY, ORDERED OTY, SHIPPED			<u> </u>

QTY. ORDERED	QTY. SHIPPED	DESCRIPTION		
			UNIT	AMOUNT
		STUDIO TIME		4575 00
		PER DIEM		
İ				600 00
		SHUPPING PRE-PRU		150 00
		FOOD, SUPPLIES TRAVEL, LODGING		
		Ti? AVE		94 03
		INTUEL, LODGING	1	550 81
<u> </u>		be. I		01
j j	$\prec W$	TOTAL		596984
		ATM PAID		3600 00
adoms NC2872		DUF		2369.94
		INVOICE		, 10 [

Parking: 50.00 Tolls: 27.00 Gas: 18.75

Notes: Per your instuctions, one extra day charged for Portugal for prep / travel. Day rate (NYC) 750.

EXHIBIT M

Rainbow Graphic & Printing Company Limited 彩虹製版印刷有限公司 a wholly-owned subsidiary of Next Media Limited 查傳媒有限公司全資附屬公司

8 Chun Ying Street, 4/F. Tseung Kwan O Ind. Estate Kowloon, Hong Kong Telephone: (852) 2752-3418 Facsimile: (852) 2897-4890 香港九龍將軍漢工集郭西數盈街8號4接

INVOICE

Messrs. Contacto Atlantico Invoice No. 0609004A AV. Marginal 6912, 2765-587 Estoril, 2765-588 Portugal Date: 4-September-2006 Attn: Agostino von Hassell Quantity Description **Unit Price** Amount No.P/617971+A Film Making & Printing For:-No.P/810056 Military High Life No.P/124523 1,000cps US\$ 4,350.00 U. S. DOLLARS FOUR THOUSAND THREE HUNDRED FIFTY ONLY. TOTAL US\$ 4,350.00

> For and on behalf of Rainbow Graphic & Printing Co., Ltd.

Terms of Payment within AXX abys from the above enter C.O.D. Interest of 1% per month will be charged to all overdue amount.

Cheque should be crossed and paid to the order of Rainbow Graphic & Printing Co., Ltd.

Lectores

8 Chun Ying Street, 4/F. Tseung Kwan O Ind. Estate Kawloon, Hong Kong Telephone: (852) 2752-3418

Facsimile: (852) 2897-4890 香港九龍將軍源工業邨西駿盈街8號4億

Rainbow Graphic & Printing Company Limited 彩虹製版印刷有限公司 a wholly-owned subsidiary of Next Media Limited **登傳集有限公司全資附屬公司**

INVOICE

Messrs. The Repton Group LLC 399 Park Avenue, 26th Floor,

New York, NY 10022, USA

Invoice No. 0609004B

Date:4. September 2006

Quantity	Description Film Making & Printing For :- Military High Life	Unit Price	Amount	
No.P/617971+A No.P/810056				
No.P/124523	5,000cps Run-on 40 copies Barcode for Cover Film correction on July 30 Courier 40 copies to 4 destination 1,000 copies sea-freight to Portugal		US\$ US\$ US\$ US\$ US\$ US\$	21,750.0 140.0 8.0 182.0 400.0 350.0
U. S. DOLLARS TWE	NTY-TWO THOUSAND EIGHT HUNDRED THIRTY ONLY. TOTAL		US\$	22,830.0

For and on behalf of Rainbow Graphic & Printing Co., Ltd.

Terms of Payment within 2322 days from the encover date/C.O.D. Interest of 1% per month will be charged to all overdue amount.

Cheque should be crossed and paid to the order of Rainbow Graphic & Printing Co., Ltd.